PLEASE PRINT

### STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15) RECEIVED

JUL 24 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s) Mark A. Laubert, Carleton Simpson  |
|---|
| II. Name of lobbyist's partnership, firm or corporation, if any:  |
| Unitil Corporation  (Name oflartnership, firm or corporation)   |
| le Liberty Lane West Hamoton VH 038Y2 Business Address: (Street) (Town/City) (State) (Zip Code)   |
| (663) 379-3848 () e-mail Simpson CRunitil. Con<br>(Telephone) (Fax) lambert & Unitil. Com   |
| III. This statement covers: (Choose one – file separate reports for each client, OR you may file a separate report for reportable expense transactions which are not attributable to any one client).                                       |
| All reportable transactions occurring in the months prior to the reporting date relative to the following client:  Unitial Corporation  (Fall Name of Client as it appears on the Lobbyist Registration Form)                               |
| All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firm listed below which are unrelated to any particular client.  |
| IV. Date of Report April 25, 2018 July 25, 2018  Reports cover: activity from date of registration to 3/31/18 activity from 4/1/18 to 6/30/18   |
| October 31, 2018  |
| V. There have been no fees received and no reportable transactions made since the last report.  If this box is checked, complete just this form and submit it to the Secretary of State's Office, State House, Room 204, Concord, NH 03301. |
| VI. Check if additional reports are attached:   |
| If you have received fees or made expenditures, you must file Addendum A. Fees and Expenses   |
| ☐ If you have paid an honorarium or reimbursed expenses, you must file Addendum B— Report of Honorariums or Expense Reimbursement   |
| If you, your firm, or your family has made political contributions, you must file Addendum C- Political Contributions   |
| Sworn Statement/Affirmation by Lobbyist  I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foregoing information is true and complete to the best of my knowledge and belief  (Signature of lobbyist)  |
| (Print Name of lobbyist)  |

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## STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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JUL 24 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

|   | DEI ARTIKEIV  |
|---|---|
| I. Name of Lobbyist(s) Mark A Lambert Carle   | ten Singson   |
| II. Name of lobbyist's partnership, firm or corporation, if any:  |   |
| Unitil Corporation (Name of partnership, firm or corporation)   |   |
| III. Name of Client Unitil Corporation  | Date <u>67/23/2018</u>  |
| IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The groreduced by any expenses:  | relations, or public relations services   |
| a) Total of all fees received in this reporting period  | a) \$ 9000  |
| b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)  | b) $s = \frac{9}{1000}$   |
| c) Total of all fees received to date   | 14  |
| (Add lines a and b)   | 0)5 18,000  |
| d) Indicate the amount of any such fees that are due, but have not, yet been paid   | d) \$   |
| V. Expenses:  | /   |
| Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to rep fees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report in Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office ex individual expenses where the expenditure was of \$25.00 or less (for exampl lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this reported any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported | elient and if expenditures are made by<br>may be filed for the lobbyist(s)/firm.<br>aggregate total of all expenses paid<br>epenses; (b) the aggregate total of all<br>e: meals purchased during a business<br>is than \$10 that is given to the person<br>d with a value of \$25.00 or less); and<br>rting period of greater than \$25.00 for<br>the of greater than \$25, purchase of a<br>r than \$25, but not greater than \$50,<br>expense reimbursement, or political |
| a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.   | a) \$ 12,480  |
| b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.   | b) \$   |
| c) Total of all itemized expenditures reported in detail in section VI.   | c)\$  |

| d) Total expenses for this reporting period  | d)s 12,480                             |
|--|--|
| (Add lines a, b and c)   |  |
| <ul> <li>c) Total of expenses paid this calendar year, prior to this reporting period<br/>(This should be the amount on line f of addendum A for last month's report)</li> </ul> | 0) \$ 12,480                           |
| f) Total of all expenses year to date  | 05 24,960                              |
| VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from leperiod, including by whom paid or to whom charged.                          | •                                      |
| Paid to:   | Amount:                                |
|  | \$                                     |
|  | \$                                     |
|  | s                                      |
| · · · · · · · · · · · · · · · · · · ·  | \$                                     |
| ·  | \$                                     |
|  | s                                      |
|  |  |
|  | *** ********************************** |
| Consens Charles and A 55° and all a 1 a 1 a 1 a 1 a  |  |
| Sworn Statement/Affirmation by Lobbyist  |  |
| I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.   | n that the foregoing information       |
| $\alpha$ . $\alpha$ = $\alpha$   |  |
| (Signature of lobbyist)  | 07/23/2018                             |
| (Signature of loboyist) 7  | (Date)                                 |
| (Print Name of lobbyist)   |  |

## STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions . Addendum C (RSA Chapter 15:6)

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JUL 24 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

| I. Name of Lobbyist(s)  | Turk A. Laub  | ext, Courlet                      | on Simpson  |
|---|---|-----------------------------------|---|
| II. Name of lobbyist's par  | tnership, firm or corp  |                                   | ·   |
| United Corpor   | nership, firm or corporation)   |                                   |   |
| M. Name of Client UNI   | til Corpora   | tion                              | Date <del>67(23/20(8</del>  |
| Political Contributions For each political contributions client/lobbyist and lobbying   | tion that is reportable pag firm, indicate the fol                          | oursuant to RSA Chapte<br>lowing: | er 664 paid on behalf of the  |
| Full name of candidate:   |   | (First Name)                      | (Middle Name/Initial)   |
| actual cost of the in-kind cor  | ind contribution, provide<br>atribution on the line above                   | a description of the goods        | Seeking Share Sanate<br>or services provided, and enter the<br>ion. If the actual cost is not known |
| enter an estimated value and  | the word "estimate."  |                                   |   |
|   |   |                                   |   |
|   |   |                                   |   |
| Full name of candidate:   | Watters<br>(Last Name)  | (First Name)                      | (Middle Name/Initial)   |
| Full name of candidate:  Amount of contribution \$                                      | (Last Name)   | (                                 | (Middle Name/Initial) Seeking State Soute   |
| Amount of contribution \$   | (Last Name)  (OO. OO  cind contribution, provide ntribution on the line abo | Office Candidate is               | ·   |
| Amount of contribution \$  If the contribution is an in-k actual cost of the in-kind co | (Last Name)  (OO. OO  cind contribution, provide ntribution on the line abo | Office Candidate is               | Seeking State Soute   |
| Amount of contribution \$  If the contribution is an in-k actual cost of the in-kind co | (Last Name)  (OO. OO  cind contribution, provide ntribution on the line abo | Office Candidate is               | Seeking State Soute   |
| Amount of contribution \$  If the contribution is an in-k actual cost of the in-kind co | (Last Name)  (OO. OO  cind contribution, provide ntribution on the line abo | Office Candidate is               | Seeking State Soute   |

|                     |  | ,                       |                         |                          |            |
|---------------------|--|-------------------------|-------------------------|--------------------------|------------|
| <del></del>         |  |                         |                         |                          |            |
|                     |  |                         |                         |                          |            |
| (If more than       | three contributions were                 | made, report additional | contributions on separa | te addendum C forms.)    |            |
| Sworn St            | tement/Affirmation                       | by Lobbyist             |                         |                          |            |
|                     | RSA 15, RSA 15-B<br>complete to the best |                         |                         | rm that the foregoing ir | nformation |
| Carlos<br>(Signatur | B. Sur                                   | Mal Illa                |                         | 67/23/20<br>(Date)       | (0         |

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